

**PERMIT APPLICATION REVIEW FORM**

Review Requested by:	<u>Allen Gaither</u>	Date Requested:	<u>8/29/12</u>
Facility Name and Permit ID	<u>Macon County Landfill, 5703-MSWLF-1992</u>		
Applicant (Owner) Name	<u>Macon County</u>		
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	<input type="checkbox"/> (1)a. New – New Facility <input type="checkbox"/> (1)b. New – Expand Facility Boundary <input type="checkbox"/> (1)c. New – Expand Waste Boundary <input type="checkbox"/> (1)d. New – Substantial Amendment <input type="checkbox"/> (2)a. Amendment – Next Phase of the Approved Facility Plan <input type="checkbox"/> (2)b. Amendment – Five-year Renewal <input type="checkbox"/> (2)c. Amendment – Change in Ownership <input checked="" type="checkbox"/> (3)a. Modification – Change to Approved Plans ( <b>No CHR</b> ) <input type="checkbox"/> (3)b. Modification – Subsequent Permit to Operate ( <b>No CHR</b> )		
Permit Fee	<u>\$ 1500</u>		
Date Application Received	<u>8/27/12</u>		
Contact Name, Title & Phone #	<u>Mr. Chris Stahl, Director of Solid Waste Management, 828-349-2100</u>		
Email Address	<u>cstahl@maconnc.org</u>		
Company	<u>Macon County</u>		
911 Address	<u>109 Sierra Drive</u>		
Mailing Address	<u>Same as above</u>		
City/State/Zip	<u>Franklin, NC 28734</u>		
Parent Company	<u>N/A</u>		
Known Subsidiaries	<u>N/A</u>		
Other known names business has operated under	<u>N/A</u>		
Known Counties of Operation	<u>Macon</u>		
Does the applicant have a past or current solid waste permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Facility Type: <u>MSW/C&amp;D/TS/Compost</u> Permit #: <u>57-01, 02, 03, 04</u>		
Did the permit applicant submit Financial Assurance cost estimates?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Not Needed <input checked="" type="checkbox"/>		
Other notes			

## PERMIT APPLICATION REVIEW TRACKING

### Clock Start

Date Application Received	8/27/12	APP ID # SW012-0057
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### Review Form Submission

Date Application Review Form Submitted	8/29/12
Submitted to Accounting Tech	Yes <input checked="" type="checkbox"/>
Submitted to Compliance Officer	Yes <input type="checkbox"/> Not Needed <input checked="" type="checkbox"/>

### Accounting Clock

Invoice Date		# of Days
Deposit Date	9/18/12	

### CHR Clock

CHR Org Chart Request		# of Days
CHR Org Chart Response	N/A	
CHR Questionnaire Request		# of Days
CHR Questionnaire Response		

### Application Review Clock

Completeness Determination Letter	9/26/12	31
Engineering Technical Review Letter #1	N/A	# of Days
Engineering Technical Review Response #1		
Engineering Technical Review Letter #2		# of Days
Engineering Technical Review Response #2		
Hydro Technical Review Letter #1	N/A	# of Days
Hydro Technical Review Response #1		
Hydro Technical Review Letter #2		# of Days
Hydro Technical Review Response #2		
Draft Permit	N/A	
Permit to Construct Issued	N/A	
CQA Received	N/A	# of Days
CQA Reviewed	N/A	
Permit to Operate Issued	10/25/12	60